

Pentagon Sailing Club

NEW MEMBERSHIP & BASIC SAILING COURSE REGISTRATION FORM

Name: _____ Date: _____

Address: _____ City: _____ State: ____ Zip: _____

Phone: (H) _____ (W) _____ (C) _____

Email: (H) _____ (W) _____

I. Membership & Basic Sailing Course

Single, 1 year \$395

Family, 1 year \$395

List family members if family membership: _____

I wish to sign up for the class:

No of Class Seats: _____ Additional Student Names: _____

(only ONE class seat is included at \$395; each additional seat is \$325)

Class 1 – Apr **Class 2 – May** **Class 3 – Jun**

Class 4 – Jul **Class 5 – Aug** **Class 6 – Sep**

I would like to receive **USNSA B-KBS** Certification upon successful completion of the class - \$32/person

I would like to receive **ASA 101/103** Certification upon successful completion of the class - \$40/person

I agree to abide by Pentagon Sailing Club policies applicable to PSC activities in which I participate. These policies may be found in PSC documents and are published on our website www.pentagonsailing.org.

PSC Privacy Policy Statement: Member personal information is used to plan, organize, and manage club training and social events or as required to conduct club business. The PSC Bridge put in place appropriate physical, electronic, and managerial procedures to safeguard and secure the information collected. PSC will not share member personal information with anyone outside the Pentagon Sailing Club and parent sailing organizations.

How did you learn about PSC?

Friend/colleague Newspaper advertisement PSC Website Poster/brochure

PSC recruiting event Facebook, Twitter or YouTube

The PSC Joe Rymal Memorial Capital Improvement Fund: This fund was established to create funds for improving the PSC Fleet. Donations to this fund will help the club improve our fleet. I wish to donate an additional \$ _____ to The PSC Joe Rymal Memorial Capital Improvement Fund

Total Fees Submitted *(check must accompany this form):* _____

*(make check payable to **Pentagon Sailing Club**)*

Signature and Date of Primary Member Applying

Mail completed form and check to:

Roger Hammer
PSC Treasurer
13130 Triple Crown Loop
Gainesville, VA 20155

II. Medical Information

A. Are there any medical or other health factors that might affect you / your child's performance in this activity? NO ____ YES ____

B. Are you / your child taking any medications that might affect your / his / her performance in this activity? NO ____ YES ____

C. Does the participant have a disability that requires any accommodation? NO ____ YES ____

D. Are there any other medical or health-related problems of which we should be aware? NO ____ YES ____

E. If YES was marked for any of the above questions, please explain. _____

Please read: All PSC activities are considered training activities. As such, our guideline is that *any student participating in these activities will be able to physically respond to the commands of the instructor or skipper in charge.* This guideline is for your safety, the safety of your fellow crew members, and the safety of the boat. The skipper will make the final determination of (1) a student's ability or inability to comply with this guideline, and (2) the limitations, if any, of a student's participation as crew on the boat.

Initials

III. Assumption of Risk and Release

A. VOLUNTARY PARTICIPATION

I acknowledge that I have voluntarily agreed to participate in an event at the Joint Base Anacostia Bolling or Potomac River venues in the National Capital Region sponsored by the Pentagon Sailing Club involving the use of a sailboat and/or a powerboat.

B. THE RISKS

Injuries to participants in small craft programs may occur from risks inherent in the sports or activities; from placing stress on the body for which it has not been prepared, from accidents in learning or practicing techniques, from failing to follow training, safety or racing rules; from the use of transportation to and from regattas, races, and other events and from administration of first aid. For example, I might slip and fall; I might be struck by part of a boat, my boat might capsize, or I might be thrown overboard into cold water, it may hit another boat or run into an obstruction or the shore, and the collision may injure me. The severity of the injury can range from minor cuts, scrapes, or muscle strains to catastrophic injury such as paralysis or even death. I will be exposed to the weather, including rain, wind, cold and sun; I might become ill through chill or suffer sunburn and heat exhaustion. In order to avoid injuries I will obey the direction of my instructors and will follow all safety rules. **I will tell my instructor about any limitations or medical restrictions on my participation.**

C. ASSUMPTION OF RISK

I AM AWARE THAT MOVING, LAUNCHING, HOISTING, LOWERING, SKIPPING, CREWING, OR BEING A PASSENGER OR STUDENT ABOARD A SAILBOAT OR A POWERBOAT AT THE JOINT BASE ANACOSTIA BOLLING MARINA AND IN THE WATERS OF THE ANACOSTIA OR THE POTOMAC RIVERS IN THE CAPITAL REGION ARE HAZARDOUS ACTIVITIES. I AM VOLUNTARILY PARTICIPATING IN THESE ACTIVITIES WITH KNOWLEDGE OF THE DANGER INVOLVED. **I AGREE TO ACCEPT ANY AND ALL RISKS OF INJURY OR DEATH, AND VERIFY THIS STATEMENT BY PLACING MY INITIALS HERE:** _____

D. RELEASE

As consideration for being permitted by Pentagon Sailing Club (PSC) to participate in this activity and to use the Bolling Air Force Base Marina facility and equipment furnished by PSC or others, I agree that my heirs, assigns, distributees, guardians, and representatives and I release PSC, Bolling Marina, US Air Force and US Navy, all of their affiliated organizations and their officers, directors, employees, members, volunteers, or participants (collectively, the Releasees) from all actions, claims, or demands that I, my heirs, assigns, distributees, guardians, and representative now have or may hereafter have, for injury, death, or damage resulting from my participation in this activity or while traveling to and from or being transported for this activity. I, my heirs, assigns, distributees, guardians and representative will not make any claim against or sue the Releasees or any of them for injury, death, or damage resulting from the negligence or other acts, howsoever caused by any employee, agent or contractor of PSC, the US Air Force and US Navy or any of their affiliated organizations as a result of my participation in this activity.

I agree to report any injury or loss of personal property as soon as possible to either the skipper of the boat I was on or any officer of the Pentagon Sailing Club (PSC), and in any case, I will report the injury or loss of personal property as soon as it is possible after becoming aware of the injury or loss. In the event that an injury or loss is not reported, I agree that such a failure or refusal to report an injury or loss constitutes a waiver of all claims against the PSC associated with the unreported injury or loss and I agree to hold harmless any and all parties associated with the injury/loss and the PSC."

E. ALCOHOL AND CONTROLLED SUBSTANCES POLICY

Alcohol is strictly forbidden on any club vessel. No one who appears to be intoxicated or under the influence of a controlled illegal substance will be allowed on board; this includes skipper and crew.

F. KNOWING AND VOLUNTARY SIGNING OF THIS DOCUMENT

I hereby acknowledge I have carefully read this agreement and fully understand its content. I am aware that this is a release of liability and a contract between PSC, the US Air Force and US Navy, their affiliated organizations, and me. I also certify that I/my child can swim or tread water for ten minutes and don a personal floatation device during the last two minutes. I agree to abide by the Rules and Regulations, as established by PSC, Capitol Cove Marina, US Air Force and US Navy while participating in this program. I am signing this document of my own free will. I further certify that all information provided above is true and correct, to the best of my knowledge.

Participant's Name:

Last

First

Mi

Signature Required

(Participant, or parent if under 18)

IV. Cancellation Policy

Exclusively volunteer instructors and administrators run the Pentagon Sailing Club (PSC) training program. Fees for activities directly offset training expenses, such as boat leasing and maintenance, slip rentals and insurance. Because of the PSC's obligatory alignment of revenue and expenses, a cancellation policy is necessary.

1. If the **student** must cancel his/her participation in an activity:
 - a. The fee will be refunded in full if notice of cancellation occurs more than 14 days before the activity start date.
 - b. The fee will **not** be refunded if cancellation occurs within 14 days of the activity start date, unless the student finds a replacement. (The PSC will assist with, but will not be responsible for, finding a replacement.)

The PSC recognizes that extraordinary circumstances may cause cancellation, and will take that into consideration for rescheduling or refunds.

2. If the **PSC** must cancel an activity, every attempt will be made to reschedule the student to a mutually agreeable date and time. If rescheduling cannot be done, the activity fee will be refunded in full.

Initials

Mail completed form and check to:

Roger Hammer
PSC Treasurer
13130 Triple Crown Loop
Gainesville, VA 20155